Notice of Funding Opportunity

HS Exercises 2020

Applications must be submitted through Egrants on or before January 31, 2021

Contact Information for this Notice of Funding Opportunity

Program Manager: Hannah Matusek (608) 242-3335

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Submit Applications Using Egrants

Applications must be submitted through the Egrants online grants management system. If you have never used Egrants before, you will need to register for access to the system. To register online, go to https://register.wisconsin.gov/accountmanagement/default.aspx and complete the 'self registration' process.

Authorization to access Egrants can take several days depending on registration activity. Please note: If you register outside the hours of Monday-Friday 7:30am-4pm, access may not be approved until the next business day. Once your Egrants access has been approved, you may begin your online grant application.

Egrants Help Desk: 608-616-0020 or <u>WEMEgrants@egrants.us</u>
The help desk is staffed on non-holiday weekdays between 7:30AM and 4:00PM.

The Egrants system user guide has step-by-step instructions for accessing and using the Egrants online system. The guide is posted on the grants page of the WEM website: https://wem.egrants.us/egmis/documents/EgrantsExternalUserGuideUpdated9-9-19-Final.pdf

Online Help is available throughout the Egrants application process. Once you have started an application, look for the HELP button in the top right corner of the screen. Page-specific instructions can be found there.

WEM Egrants website: https://wem.egrants.us

Requirements for Federally Funded Grants

Data Universal Numbering System (DUNS) Number:

The federal government requires a DUNS number as part of the grant application to keep track of how federal grant money is awarded and dispersed. If your organization needs to obtain a DUNS number, go to http://fedgov.dnb.com/webform. You can also search this site if you cannot find your agency's number. Under normal circumstances, a new account can be created in 24-72 hours. The federal government has published DUNS Frequently Asked Questions at http://fedgov.dnb.com/webform/displayFAQPage.do. Check with your agency's financial office before registering for a DUNS number - it is likely your agency already has one.

Unique Entity Identifier and System for Award Management (SAM):

All applicants for this grant opportunity must be registered in SAM before submitting an application; and continue to maintain an active SAM registration with current information at all times during the period of performance for the grant.

WEM's website has a helpful guide for SAM registration. https://dma.wi.gov/DMA/divisions/wem/egrants/How to Register in SAM.GOV.pdf

WEM cannot award a grant until the applicant has complied with all applicable DUNS and SAM requirements.

Notice of Funding Opportunity: HS Exercises 2020

Description: This grant will continue to support a competitive grant program for exercise contractor support, supplies, and travel costs for county and tribal exercises. County and Tribal exercises are critical to test local plans, train local emergency responders, and enhance local capabilities.

Opportunity Category: Limited Eligibility: County & Tribal Emergency Management

Important Dates:

Application Due Date: January 31, 2021

Project Start Date: February 26, 2021

Project End Date: August 31, 2022

Reporting Requirements: If awarded a grant, your agency will be responsible for completing the following reports in order to receive reimbursement.

Program Reports Frequency must be submitted quarterly

Financial Reports Frequency must be submitted quarterly

Anticipated Funding Amount: As approved by the funding advisory work group, the dollar amount available under this funding opportunity is \$110,000.

Match/Cost Sharing Requirement: None

Eligibility: County or tribal emergency management offices are the only eligible applicants. Applicants interested in applying for an exercise grant must first contact Wisconsin Emergency Management (WEM) to be assigned an exercise officer who will help determine the appropriate scope and expenses for the requested exercise.

Eligible Expenses: Funding may be used for Travel/Training, Supplies & Operating Expenses and Consultants/Contractors. Overtime and backfill is not an eligible expense.

All expenses must be new and cannot replace existing state or local government funding. Substitution of existing funds with federal grants (supplanting) will be the subject of monitoring and audit. Violations may result in a range of penalties, including suspension of current and future funds under this program, suspension or debarment from federal grants, repayment of monies provided under a grant, and civil and/or criminal penalties.

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Description: Exercises are a key element of Wisconsin's Homeland Security Strategy to improve emergency responder capabilities. Exercises assist agencies in achieving objective assessments of their response capabilities and help identify areas needing improvement prior to a real incident. Exercises also inform local and statewide planning activities by highlighting needs for future resource allocation. Homeland Security exercise grants are intended to support a statewide exercise program through direct support to tribes, counties and state agencies.

Due to limited funds, applicants must first make use of WEM exercise officers and/or local agency expertise when developing and conducting exercises. Contact must be made with Kevin Wernet and/or his designee at WEM to ascertain the availability/assignment of WEM's exercise officers (Kevin.Wernet@Wisconsin.gov 608-219-4014). When WEM exercise officers are not available to assist with the development and execution of the exercise event as determined by Mr. Wernet, grant funds may be used to hire contractors/consultants to manage exercise development, execution, evaluation and completion of after-action reports (AARs). Please note that documentation of the contact to WEM must be included in the Required Attachment section. Every effort should be made to maximize grant dollars through the coordination of participating agency resources. If using contractors or consultants, these individuals must be trained in the Homeland Security Exercise and Evaluation Program (HSEEP).

Exercises should align with priorities and capabilities identified In the Multi- Year Training and Exercise plan. https://dma.wi.gov/DMA/divisions/wem/training/docs/TEPW Report 2018-2022.pdf

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Application Components

Through Egrants, you will provide WEM with detailed information about your project that will be used to make a funding decision. Questions on what is expected in each section can be directed to the Program Manager listed on page one of this document.

Information provided in this application may be cited in WEM reports or press releases and will likely be used in reports to federal funding agencies or other stakeholders. Plain language that clearly describes the intent of the project is most effective.

1. Main Summary

This page asks for information about your agency and the individuals responsible for the application and grant award. When identifying individuals involved in this grant, you may not list the same person as project director and financial officer. The financial officer is the individual responsible for financial activities in your organization while the project director will be overseeing project operations. An Alternate contact may be added to the application. This person is one that can and should access the application to complete required tasks such as modifications and reports, in the absence of the Project Director. This person should have knowledge of the project and authority to speak on behalf of the organization in the absence of the Project Director. If possible, we encourage the Project Director to list an alternate on the grant.

- The Signatory is the highest elected official. (example: Mayor, County Board Chair, Tribal Chair, etc.) For a non-profit this would be the Board President
- The Financial Officer Person at the applicant agency who is responsible for financial reporting.
- The Project Director Person at the applicant agency who is responsible for the project and for programmatic reporting.
- An Alternate contact may be added to the application. This person is one that can and should access the application to complete required tasks such as modifications and reports, in the absence of the Project Director. This person should have knowledge of the project and authority to speak on behalf of the organization in the absence of the Project Director. If possible, we encourage the Project Director to list an alternate on the grant.

In the Brief Project Description text box, please describe your project. A suggested format is included for your convenience:

"Funds will be used by the (your agency name and others involved in the project) to (describe what funds will be used for and who will be involved). The (what - equipment, training, project, pilot, etc.) will (describe the specific goals you hope to achieve – how will the project or equipment improve safety in Wisconsin?)"

There are many required fields on this page so if you encounter problems, please check online help by clicking the floating HELP button.

2. Performance Measures

Enter the number of tabletop, functional, and full-scale exercises that will be conducted during the performance period of this grant.

3. Budget Detail

Complete a project budget using the following categories. For each category used, enter a justification that describes how the items in that category will be used during the course of the grant period. It is important that you include specific details for each budget line item, including cost calculations.

Travel/Training:

Guidelines for Travel and/or training costs for an individuals with the funded project. Only actual expenses will be reimbursed. All reimbursements will be at current state rates that are subject to change. Current rates for in-state travel at the time of this announcement include:

Mileage: \$0.51/mile

Lodging: Maximum \$82/night (\$90/night for Milwaukee, Waukesha or Racine County)

Meals: \$8/breakfast (leaving before 6 a.m.); \$10/lunch (leaving before 10:30 a.m. and returning after 2:30 p.m.); \$20/dinner (returning after 7 p.m.).

Guidelines for any Travel and/or training costs associated for hosting an event (conference/convention, training, exercise, etc.) with the funded project. Only actual expenses will be reimbursed. All reimbursements will be at current state rates that are subject to change. Current rates for in-state travel at the time of this announcement include:

Meal cost per attendee: \$8/breakfast (start time prior to 6 a.m.); \$10/lunch (starting before 10:30 a.m. and concluding after 2:30 p.m.); \$20/dinner (event ending after 7 p.m.). Some events may be eligible for \$7/break expenses, for more information regarding state guidelines and expense reasonableness please call or email the Program or Fiscal Contact listed on this Grant Opportunity.

(Please note: Costs will only be reimbursed after submission of an event agenda and attendance list. Travel and training for contracted employees/Contractual Services does not go in this section. These expenses should be itemized under "Contractual.")

<u>Supplies and Operating Expenses</u>: Includes consumables such as paper, stationery, postage, and software. Also includes operating expenses such as rent and utilities. Show computations for all items. For example, Rent: \$150/mo x 12 months = \$1,800.

(Please Note: Contractor expenses for supplies should not go in this section. Supplies purchased by a contractor should be itemized under Consultant/Contractual, Product & Services.)

Consultants/Contractual: Provide costs associated with individuals or entities providing services through a contractual arrangement. With the exception of a few justified sole source situations, contracts should be awarded via competitive processes. Attach detailed information to support the total cost of each contract. Please note that in order to receive reimbursement for these expenses, the consultant must provide an itemized invoice of actual expenses that includes detail sufficient to verify that the actuals match the executed contract or quote and adhere to the Wisconsin Travel Policy. For each consultant enter the name, if known; service to be provided; hourly rate and estimated time on the project. Hourly rate for training and exercise contractors may not exceed \$50.00/hour. Show the basis of computation for each service requested.

- Consultants/Contractual these are costs associated with the consultant/contractor rate of pay or flat fee contractual agreement.
- Consultants/Contractual Product/Service these costs are for items such as, but not limited to; duplicating, videotaping, moulage, general office supplies, and catering the consultant/contractor has purchased.
- Consultants/Contractual Travel these are costs are associated with mileage, hotel, and meals the consultant/contractor incurred performing contractual work. All expenses will be reimbursed at current state rates.

See Appendix A for examples of budget lines that provides sufficient detail and justification.

4. Budget Narrative

Select Yes or No: Does your agency require a signed contract after the grant is awarded in order to pay the exercise contractor? If yes, you will be required to provide a copy of the executed/signed contract in Egrants prior to reimbursement

5. Project Narrative

Write a narrative that clearly identifies whether this is a tabletop, functional, or full-scale exercise. Provide a clear description of the scenario and scope of the exercise. The scenario should be reasonable, realistic, and appropriate for the jurisdiction.

6. Project Development & Impact to Date

Write a narrative that describes how the exercise is part of a multi-year strategy, including previous relevant trainings or exercises that have been completed.

7. Evidence of Need

Write a narrative that:

- explains the need for this exercise in your jurisdiction.
- explains how the exercise addresses the risks and capability gaps that have been identified by the jurisdiction.

8. Free Style Questionnaire- Core Capabilities

Choose a primary core capability for the project. Select as many secondary core capabilities as applicable for the project.

9. Implementation Plan

 List the expected or planned participants for the exercise including government agencies and non-governmental organizations. Also, note which discipline are participating.

10. Design and Implementation Strategy

• Provide the timeline for this project including planning and design meetings, exercise execution, and the development of the AAR.

When selecting a start date for your project activities, take into consideration the time necessary to receive the grant award. WEM projects that most grants will most like have a February 30, 2021 start date. However, if the project includes a full-scale exercise you must also receive the EHP approval prior to the exercise, and a March 30, 2021 start date is likely the earliest reasonable start date.

11. Evaluation

Grant proposals for a functional or full-scale exercise must include a copy of the AAR from the prior exercise in the Required Attachment section of the application. Prior to receiving funding for the next exercise in the progressive series, there must be evidence that demonstrates corrective actions items have been addressed.

- List the corrective actions identified in previous AARs that have been completed.
- List the corrective actions identified in previous AARs that have not yet been completed but will be prior to the next exercise in this series.
- List the corrective actions identified in previous AARs that have not been completed and won't be prior to the next exercise in this series and explain why that is the case.

12. Other Funding

Fill in the grid to show any cost share including item, estimated dollar amount and sources of funding in addition to grant funds will be used to conduct this exercise.

13. Required Attachments

Please attach the following documents to your application in this section

- Attach an email that documents your communication with the WEM exercise section regarding the availability of exercise officers and compliance with state exercise priorities.
- Attach a quote if hiring a contractor.

 AAR (with Improvement Plan) from previous exercise if requesting funding for a functional or full-scale exercise.

Application Review and Award Criteria

All applications must be submitted on or before the deadline and will be screened for completeness and compliance with the instructions provided in this announcement. WEM staff will review applications to ensure consistency with statewide strategies and make funding recommendations to the Adjutant General. All final grant award decisions will be made by the Adjutant General.

Post-Award Special Conditions/Reporting Requirements

from the U.S. Department of Homeland Security."

If you are awarded funds under this announcement, you will be required to provide regular progress reports. The schedule for your reports will be included in your grant award materials.

Please review all of your grant award special conditions and Egrants reporting requirements when you receive the Grant Award documents. Your grant award will be subject to general terms and conditions as well as the following special conditions.

- Title: Meal and Mileage Reimbursement
 Reimbursement for meals and break items for meetings are contingent upon submission of
 agenda and roster or attendance list and must support the expense. All meals and break
 materials are reimbursed at current state rates and uniform travel guidelines. Information
 about rates and mileage is on the OSER website:
 http://oser.state.wi.us/docview.asp?docid=7365. The Grants Specialist is available to
 answer questions before costs are incurred.
- 2. Title: Procurement

Recipients and sub recipients shall use their own procurement standards and regulations, provided that the procurement conforms to applicable Federal law and the standards identified in the Procurement Standards Sections of 2 CFR § 200.318-326.

- 3. Title: Publications Acknowledgement
 The sub-recipient agrees that all publications created with funding under this grant shall
 prominently contain the following statement: "This document was prepared under a grant
- 4. Title: Grant Modification Grant modification must be approved by Wisconsin Emergency Management (WEM) in order to be considered. The applicant must be current with WEM Fiscal and Program Reports in Egrants for modification to be consideration. Grant modifications will not be granted unless applicant provides a compelling reason.

5. Title: Copy of Contract Required

Copy of contract must be submitted to WEM. If hiring an independent consultant or contractor, submit a contract detailing job specifications and deliverables. Upload the contracts into Egrants within the Monitoring Section under Project Document Attachment.

6. Title: HSEEP for Exercises

All exercises must follow the exercise methodology as directed by the Homeland Security Exercise Evaluation Program (HSEEP).

7. Title: After Action Report Requirements

The exercise after action report is due within 60 days of completion of the exercise and must include an improvement action plan matrix. Upload each of the documents into Egrants in the Monitoring Section under Project Document Attachment.

8. Title: EHP Review & Approval

This grant is subject to Environment Planning and Historic Preservation (EHP) review and approval by FEMA. No funds linked to the EHP request may be spent until the project is approved by FEMA and notification of the approval is made from WEM to the sub-recipient. The notice of approval must be uploaded into Egrants in the Project Document Attachment section in the Monitoring section of Egrants. The review and approval by FEMA may take up to 12 months.

9. Title: EHP Documentation

The sub-recipient is responsible for the preparation of documentation required to fulfill compliance responsibilities under the Federal EHP laws; this documentation may include, but is not limited to site studies, biological assessments, archaeological surveys, environmental assessments, and environmental impact statements. The sub-recipient must send the forms to WEM per the instructions of the WEM program manager who will send the EHP documents to FEMA. Costs associated with the preparation of these documents are allowable grant expenditures. All costs must be approved by WEM.

10. Title: EHP Mitigation

The sub-recipient is responsible for implementation of any mitigation measures required by FEMA to address potential adverse impacts that may have been identified during the EHP review process.

11. Title: Roster Required

Reimbursement of costs will be contingent on submission of an exercise roster which must contain exercise name, dates, student name, and agency affiliation. Upload the roster into Egrants within the Monitoring Section under Project Document Attachment. Each roster must only contain one exercise.

12. Title: SAM Requirement

SAM.gov Requirement – Pursuant to 2 CFR Part 25.200, the applicant must be registered in the System for Award Management (SAM.gov) prior to submitting an application for federal funds and they must certify that they will maintain an active SAM registration at all times during which it has an active federal award.

FY20 Exercise NOFO

Appendix A: Sample Budget Lines

Example 1: Tabletop Exercise conducted by EM Director. Costs are for supplies and room rental.

Supplies and Operating

Justification: The following supplies will be used for the tabletop exercise.

Supply item: Break item for attendees

Description of Computation: \$7/person for 75 attendees

Total: \$525

Supply item: Printing (Handouts, sign in sheets, exercise resources)

Description of Computation: \$0.50 per unit for 400 units. Per unit price will vary based on item

printed so an average cost of \$0.50 was used for the budget.

Total: \$200

Supplies and Operating- \$725

Travel /Training

Justification: The cost for room rental for tabletop exercise.

Supply Item: Room Rental

Description of Computation: \$175 x 2 (Estimated \$175/room. Exercise will be held twice in the

county requiring two room rental fees.)

Total: \$350

Travel /Training- \$350 **TOTAL: \$1,075.00**

Example 2: Tabletop Exercise conducted by a contractor. Costs are for Consultant/Contractual- Consultant, Consultant/Contractual- Product/Service, and Consultant/Contractual- Travel.

Consultant/Contractual- Consultant

Name/Position: ABC Vendor Service Provided: Meeting Prep

Description of Computation: 4 hours X \$50/hour

Total: \$200

Consultant: ABC Vendor Location: Town, WI

Item: Initial Planning Meeting Travel Time

Description of your computation: 4 hours X \$50/hour

Total: \$200

Name/Position: ABC Vendor

Service Provided: Initial Planning Meeting

Description of Computation: 2 hours X \$50/hour

Total: \$100

Name/Position: ABC Vendor Service Provided: Meeting Prep

Description of Computation: 6 hours X \$50/hour

Total: \$300

Consultant: ABC Vendor Location: Town, WI

Item: Final Planning Meeting Travel Time

Description of your computation: 4 hours X \$50/hour

Total: \$200

Name/Position: ABC Vendor

Service Provided: Final Planning Meeting

Description of Computation: 2 hours X \$50/hour

Total: \$100

Name/Position: ABC Vendor

Service Provided: Exercise Development

Description of Computation: 8 hours X \$50/hour

Total: \$400

Consultant: ABC Vendor Location: Town, WI

Item: Conduct Exercise Travel Time

Description of your computation: 4 hours X \$50/hour

Total: \$200

Name/Position: ABC Vendor

Service Provided: Exercise Prep and Registration Description of Computation: 16 hours X \$50

Total: \$800

Name/Position: ABC Vendor

Service Provided: Exercise Set up, Conduct, and Clean Up

Description of Computation: 4 hours X \$50/hour

Total: \$200

Name/Position: ABC Vendor

Service Provided: Prep After Action Report

Description of Computation: 16 hours X \$50/hour

Total: \$800

Name/Position: ABC Vendor

Service Provided: Finalize AAR and Project Close out Description of Computation: 2 hours X \$50/hour

Total: \$100

Consultant/Contractual- Consultant- \$3,000

Consultants/Contractual- Product/Service

Consultant: ABC Vendor

Item: Expendable Supplies (table tents, manuals, etc.)

Description of computation: estimated \$150

Consultant/Contractual- Product/Service- \$150

Consultants/Contractual- Travel

Consultant: ABC Vendor Location: Town, WI

Item: Initial Planning Meeting Mileage

Description of your computation: 200 miles X \$0.51/mile

Total: \$132.60

Consultant: ABC Vendor Location: Town, WI

Item: Initial Planning Meeting Meal Per Diem

Description of your computation: 1 staff X 1 Lunch at state rate

Total: \$10

Consultant: ABC Vendor Location: Town, WI

Item: Final Planning Meeting Mileage

Description of your computation: 200 miles X \$0.51/mile

Total: \$132.60

Consultant: ABC Vendor Location: Town, WI

Item: Final Planning Meeting Meal Per Diem

Description of your computation: 1 staff X 1 Lunch at state rate

Total: \$10

Consultant: ABC Vendor Location: Town, WI

Item: Conduct Exercise Mileage

Description of your computation: 200 miles X \$0.51/mile

Total: \$132.60

Consultant: ABC Vendor Location: Town, WI

Item: Conduct Exercise Meal Per Diem

Description of your computation: 1 staff X 1 Breakfast, Lunch and Dinner at state rate

Total: \$38

Consultant: ABC Vendor Location: Town, WI

Item: Conduct Exercise Lodging

Description of your computation: 1 Staff X 1 Night at state rate

Total: \$82

Consultants/Contractual- Travel- \$1,137.80

TOTAL: \$4,287.80